SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse	A Signature X harry Farrasut Agent Addressee
so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from Item 1?
Eastern District of Louisiana C-151 Hale Boggs Federal Bldg	• • • • • • • • • • • • • • • • • • •
500 Poydras Street New Orleans, LA 70130	Express Mall Return Receipt for Merchandise
	☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number (Transfer from service label)	106 0100 0001 7312 3188 <u> </u>
DS Earn 3811 Solvegor 2004 Domestic Patrick Receipt 08 CV L/7 / 10959502M1540	

08CR 476

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MICHAEL W. DOBBINS CLERK, U.S. DISTRICT COURT,